

<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	Application Number		10/077,601-Conf. #1545	
	Filing Date		February 15, 2002	
	First Named Inventor		Pengfei WU	
	Title		OPTICAL STORAGE SYSTEM	
	Art Unit		1756	
	Examiner Name		M. J. Angebrannt	
Attorney Docket No.		1823430.00121US1		

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 23483

OR

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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City	State	Zip	
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	Date
Name	Telephone
Title and Company	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ "Total of 1 forms are submitted.